

NEWS for the Licensed Dietitian



A newsletter published by the Oregon Board of Examiners of Licensed Dietitians

SPECIAL POINTS OF INTEREST:

- *Message from the Chair*
- *Congratulations to New Licensees*
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- *Interested in Consumer Topics?*

BOARD OF EXAMINERS OF LICENSED DIETITIANS

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MESSAGE FROM THE CHAIR

The Oregon Board of Examiners of Licensed Dietitians recognizes that there is much activity around the promotion of educational programs designed to produce "Certified Nutritionists." The curriculum offered in these non-accredited programs does not meet the standards set forth by the American Dietetic Association for evidenced-based education and does not require a basic understanding of science,

mathematics or human physiology. The Board is developing a response to these educational programs so that Oregon citizens' health and welfare are protected from fraudulent nutrition information. Look for further communication on this topic in the next newsletter.

Respectfully,

Linda Graybeal, Board Chair

Board-Member Changes

Pam Ealy, public member, has served the legal limit of two consecutive three-year terms. In doing so, she has contributed beyond the norm by transcribing the recorded board-meeting minutes. The reader will appreciate the magnitude of that extra-mile willingness. Pictured, Linda Graybeal (left) presents Pam with a certificate of appreciation.



Harold Burden has been welcomed to the position vacated by Pam. Harold has a Master's of Public Health and was a health educator for

the Adventist Medical Center for 23 years. Since 1998, he has volunteered full-time with the Coronary Health Improvement Project (CHIP), a community-based lifestyle program.

Congratulations To New Licensees



The Board would like to welcome the following newly Licensed Dietitians:

ALBANY

ATHENA NOFZIGER
ANGELA PALMER

ALEA HI

SHERRIE SONOMURA

AMBOY WA

REBECCA MATHIS

ATHENS GA

SUZANNE COOPER

BAKER CITY

ANDREA CLOUDT

BEAVERTON

AUDREY GAMEROS
HOLLY HEAVER
JAN HEDENGREN
SOMMER-LEE MILLER
LINDSEY PIERSON

BEND

LORI BRIZEE
ERIS CRAVEN
ANDREA WILLIAMSON

BOISE ID

LAURA ANDERSON

EL PASO TX

AMNA HUSSAIN

EUGENE

KARI COX

FLORENCE

MELISSA CARTER

GALLUP NM

DALIA ZIMMERMAN

GRESHAM

JANE SCHUSTER

HILLSBORO

NATALIE MCBRIDE

KLAMATH FALLS

STUART KOPPS

LAKE OSWEGO

ANTHONY PORTER

LEBANON

RACHAEL BEYER

MCMINNVILLE

ZEPHYR KAMPH

MEDFORD

ALLISON HENRIE

NAMPA ID

DARCY GANS-BELOW

NORTH BEND

MARLEE NEWTON

PORTLAND

STEPHANIE ABBOTT
ERIN BYE
JENNIFER CHASTAIN
SUZANNE DIXON
KATHERINE FISCHER
MARCELLE FITTERER
ANGELA HORGAN
ELISE KAYSER
REBECCA KITTERMAN
STEPHANIE KOHLER
ILEANA LEE
ALISON MADLEM
HEATHER MARTIN
KATHRYN MCBRIDE
JANET MUCKRIDGE
MEGAN PORTER
JENNIFER ROARK
MELINDA SEARLE
MARGARET SENIC
ANNE WRIGHT

SACRAMENTO CA

AMY LEININGER

SAMMAMISH WA

ALMA KAHAN-NOCCHI

SAN ANTONIO TX

ANN GREDIAGIN

SARATOGA SPRINGS NY

BARBARA GEORGE

SHERWOOD

BONNIE RANNO

SPRINGFIELD

PATRICIA FAHLSTROM-NOPP

VANCOUVER WA

WENDY PETERSEN

WEST LINN

SHEILA HEUSCHKEL

Past and Current Newsletters

Past and current LD newsletters are posted on the Board Internet site under "Forms/Other Publications." For history

and activity of the Board, please go to this site at <http://www.bld.state.or.us>.

Those new to licensure can find answers to questions about the Board's purpose and activities in the past newsletters.

Limited-Time Offer

The Licensure brochure is being updated. If you would like free copies of the current brochure to use in health fairs, marketing your practice

or any number of many other uses, please contact Douglas Van Fleet at 971-673-0190 or doug.vanfleet@state.or.us. There is room on the brochure to add your

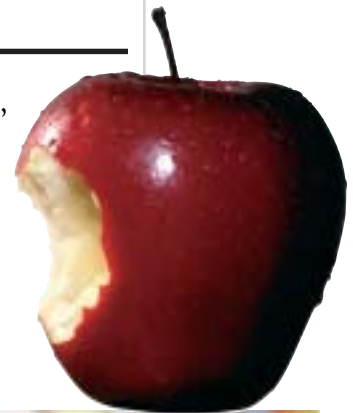
personal contact information. You can view the brochure on line at the website: www.bld.state.or.us, "Consumer Awareness" link.

Board Action

The board considered the request from a licensee to occasionally hold meetings outside of

the Portland area. It was determined that the expense of this is not justified. Any licensee is invited to join a meeting

via teleconference, and the licensee should call the board office for arrangements.



Interested In Consumer Topics?

The following notices may be of interest to LD's who follow consumer food safety, nutrition, dietetics and nutrition-fraud topics. They are excerpted from the sites listed.

Diabetes PHD

Diabetes PHD (Personal Health Decisions) is a powerful new risk-assessment tool. It can be used to explore the effects of a wide variety of health-care interventions, including losing weight, stopping smoking, and taking certain medications.

What does Diabetes PHD do? In order to provide the most accurate health information to you, Diabetes PHD will ask you to create a personal health record. You will be asked to enter as much information as you can about your health history: height, weight, cholesterol levels, blood-pressure readings, last dilated eye exam, current medications, A1c number, etc.

In a short time, Diabetes PHD will determine a personalized Results Overview for you, showing your current risk for diabetes, heart attack, stroke, kidney failure, as well as foot and eye complications. By changing certain variables in your profile, like stopping smoking, losing weight, taking ACE inhibitors, getting a regular foot exam etc., you will be able to see how making these changes would affect your future health. <http://www.diabetes.org/diabetesphd/default.jsp> Accessed 8/17/2006

Annual Bibliography of Significant Advances in Dietary Supplement Research 2004

The Office of Dietary Supplements (ODS) at the National Institutes of Health (NIH) announced the release of the 2004 issue of the *Annual Bibliography of Significant Advances in Dietary Supplement Research*. This sixth issue of the Bibliography includes abstracts of the 25 most noteworthy dietary supplement research papers published in 2004, as judged by an international team of reviewers. This is the first issue of the Bibliography to highlight research on phenolics and flavonoids—compounds found in plant foods such as berries, grains, and tea—reflecting growing interest in these substances and their potential health effects. In addition to the papers on phenolics and flavonoids, the Bibliography for 2004 includes papers on antioxidants, vitamins, minerals, botanicals, fatty acids, and other ingredients contained in dietary supplements. Over 325 original research articles were nominated for inclusion, from 53 peer-reviewed journals. An international team of 49 expert reviewers in the fields of nutrition, botanical sciences, and public health reviewed and ranked the articles and the top 25 were

selected for the Bibliography. Copies of the *Annual Bibliography of Significant Advances in Dietary Supplement Research 2004* may be downloaded from the ODS website at http://ods.od.nih.gov/Research/Annual_Bibliographies.aspx. Single copies may also be requested by e-mail (ods@nih.gov), or by writing to the OFFICE OF DIETARY SUPPLEMENTS, NATIONAL INSTITUTES OF HEALTH, 6100 EXECUTIVE BLVD, RM 3B01, MSC 7517, BETHESDA, MD 20892-7517, USA

U.S. Department of Health and Human Services
NATIONAL INSTITUTES OF HEALTH NIH News NIH Office of the Director (OD)
<http://www.nih.gov/icd/od/>

Office of Dietary Supplements (ODS) <http://ods.od.nih.gov/> Monday, October 24, 2005. Accessed 8/17/2006.

New Food & Drug Administration Food Code

The U. S. Food and Drug Administration (FDA) publishes the *Food Code*, a model that assists food-control jurisdictions at all levels of government by providing them with a scientifically sound technical and legal basis for regulating the retail and food-service segment of the industry (restaurants and grocery stores and institutions such as nursing homes). Local, state, tribal, and

Consumer Topics (continued)

federal regulators use the FDA Food Code as a model to develop or update their own food safety rules and to be consistent with national food regulatory policy. <http://www.cfsan.fda.gov/~dms/foodcode.html>

For status of the states' adoptions, go to <http://www.cfsan.fda.gov/~ear/fcadopt.html#adopt> Accessed 8/17/2006.

Folic Acid Fortification Drops Birth-defect Rate

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=16140696&query_hl=1
 Researchers who reviewed birth-defect data from 21 states before and after the FDA mandated the fortification of grain products with folic acid have found that spina bifida and anencephaly decreased by about 1/3 among Hispanic and non-Hispanic white infants. However, since current fortification levels do not ensure that pregnant women will consume the recommended amount (400 micrograms/day), recommendations for dietary supplementation are still appropriate for women likely to get pregnant. [Williams LJ. Decline in the prevalence of spina bifida and anencephaly by race/ethnicity: 1995-2002. 116:580-586, 2005] (Accessed 8/17/2006.)

Obesity

A new report from Trust for America's Health finds that national and state policies are

falling far short of obesity control and reduction goals. TFAH concludes that America does not have the aggressive, coordinated national and state strategies needed to address the crisis, and that threatens to make the epidemic worse. Forty-one states have obesity levels over 20 percent. Nearly 119 million American adults, 65 percent of the population, are currently overweight or obese. The direct and indirect costs of obesity in America are more than \$117 billion per year. Some key findings from the study include:

- The federal government faces organizational issues, including a lack of designated leadership, a bureaucratic tangle of involved agencies, and a need to learn to balance the often competing interests of industry and public health.
- Obesity and obesity-related disease rates are escalating throughout the nation.
- Most school food and physical activity programs and policies need more aggressive support and attention.
- State policies and actions aimed at obesity are fragmented and inadequate.

To help combat the obesity crisis, TFAH's report recommends a number of specific government actions. <http://healthyamericans.org/reports/obesity/>

Oregon Status: <http://healthyamericans.org/reports/obesity/release.php?StateID=OR> Accessed 8/17/2006

Consumer Advice Food Safety & Disaster Assistance

Resource information for safe food and water when disasters occur such as fires, floods, hurricanes, power outages, etc., is available at federal-government websites. <http://www.foodsafety.gov/~fsg/fsgdisas.html> Accessed 8/17/2006

Approaches to Establish Thresholds for Major Food Allergens and for Gluten in Food

A draft technical report prepared by The Threshold Working Group is available at <http://www.cfsan.fda.gov/~dms/alrgn.html>

The Food Allergen Labeling and Consumer Protection Act of 2004 (P.L. 108-282) (FALCPA) amends the Federal Food, Drug, and Cosmetic Act (FFDCA) and requires that the label of a food product that is or contains an ingredient that bears or contains a "major food allergen" declare the presence of the allergen as specified by FALCPA. FALCPA defines a "major food allergen" as one of eight foods or a food ingredient that



Consumer Topics (continued)

contains protein derived from one of those foods. A food ingredient may be exempt from FALCPA's labeling requirements if it does not cause an allergic response that poses a risk to human health or if it does not contain allergenic protein. FALCPA also requires FDA to promulgate a regulation defining the term "gluten-free."

This report summarizes the current state of scientific knowledge regarding food allergy and celiac disease, including information on dose-response relationships for major food allergens and for gluten, respectively. The report presents the biological

concepts and data needed to evaluate various approaches to establishing thresholds that would be scientifically sound and efficacious in relation to protection of public health. Each approach has strengths and weaknesses, and the application of each is limited by the availability of appropriate data. It is likely that there will be significant scientific advances in the near future that will address a number of the limitations identified in this report.

The Threshold Working Group expects that any decisions on approaches for establishing thresholds for food allergens or for gluten would require consideration of additional factors not covered in this report. Furthermore, one option that is implicit in the report's discussion of potential approaches is a decision not to establish a threshold at this time. <http://www.cfsan.fda.gov/~dms/alrgn.html> Accessed 8/17/2006

FTC spearheads Internet consumer protection alliance.

A multimedia campaign to help consumers stay safe online has been launched by a partnership that includes cybersecurity experts, online marketers, consumer advocates, and federal officials. The participants include the Department of Homeland Security, United States Postal Inspection Service, Department of Commerce,

GetNetWise, National Cyber Security Alliance, Anti Phishing Working Group, TRUSTe, i-SAFE America, AARP, National Consumers League, Direct Marketing Association, SANS Institute, WiredSafety.org, National Association of Attorneys General, and Better Business Bureau. [FTC and partners urge consumers to be on guard online. FTC news release, Sept 27, 2005] <http://www.ftc.gov/opa/2005/09/onguardonline.htm>

The campaign's new OnGuard Online Web site <http://www.onguardonline.gov/> contains tips, articles, videos, and interactive activities that address how to recognize scams; shop securely; avoid hackers and viruses; and deal with spam, spyware, and phishing. Its article on Spam Scams includes weight loss claims and cure-all products among the ten types of spams to screen out. Also available in Spanish. Accessed 8/17/2006.

ADA updates fluoridation booklet.

The American Dental Association has expanded and updated its "Fluoridation Facts" booklet, which can be read online free of charge http://www.ada.org/public/topics/fluoride/facts/fluoridation_facts.pdf or purchased in printed form for \$11.95 by ADA members and \$17.95 by nonmembers. Accessed 8/17/2006.



Q&A Answering Your Questions

New Educational Requirements for RD eligibility –

(DIETETICS EDUCATION AND LICENSURE OF DIETITIANS IN OREGON)

One of the recommendations in both the original report (2005) and final report (2006) from the ADA Dietetics Education Task Force was that "...the Commission on Dietetics Registration (CDR) require a graduate degree for eligibility for the CDR registration examination for professional entry into dietetics practice."

Q Does this mean that a dietitian will have to have an advanced degree in order to be registered (RD)— a requirement to be a licensed dietitian (LD) in Oregon?

A Only a dietitian taking the CDR exam would be required to have a graduate degree (and only after such a regulation were put into practice). The advanced degree requirement would not apply to anyone who has already taken the exam.

State Licensure Boards

Q Does the Oregon Board of Examiners of Licensee Dietitians interact regularly with other state licensure boards?

A One would think they would, but this has not happened so far. However, the ADA Director of State

Government Regulations in Washington DC, Juliana Smith, has contacted all state licensure boards about setting up a national conference for all Boards of Dietetics Licensure. The purpose would be to discuss licensure-related issues such as the potential effect on state licensure laws of requiring an advanced degree in order to sit for the CDR exam.

Dietitian Regulation

Q What is the difference between licensure, certification and registration?

A Licensing – A state's enabling statutes include an explicitly defined scope of practice; performance of the profession is illegal without first obtaining a license from the state.

Statutory certification – A State's enabling statutes limit use of particular titles to persons meeting predetermined requirements, while persons not certified may still practice the occupation or profession. Oregon is an example of a state with statutory certification.

Registration — the least restrictive form of state regulation. As with

certification, unregistered persons may be permitted to practice the profession if they do not use the state-recognized title. Typically, exams are not given and enforcement of the registration requirement is minimal.

Forty-four states have statutory provisions regarding professional regulation of dietitians and/or nutritionists.

For further information, go to www.eatright.org.

Insurance Reimburseability

Q Isn't it true that if a physician refers a patient to me for nutrition counseling for a medical diagnosis, I will be reimbursed by insurance?

A Many insurance companies require licensure in order for healthcare professionals to be reimbursed. The concern is that unqualified providers could dispense questionable advice. If a state doesn't license dietitians, services might not be covered regardless of whether a physician orders them.



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Questions About Licensure?

If you have questions about the history, purpose and meaning of dietitian licensure in Oregon, past issues of *News for the Licensed Dietitian* are posted and printable on the Board of Examiners internet site. As always, feel free to contact the Board office if you have additional questions.

WE'RE ON THE WEB!
<http://www.bld.state.or.us>

*The mission of the Oregon State Board of Examiners of
Licensed Dietitians is to protect the public's health, safety
and well being by regulating licensed dietetic practice.*